

Replacement Local Development Plan 2018-2033

Background Paper

BP24: Delivering public health and well-being priorities through Local Development Plans (LDPs) in Wales

**Deposit Plan
November 2025**



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Delivering public health and well-being priorities through Local Development Plans (LDPs) in Wales

Prepared for:

Public Health Wales, Wales Health Impact Assessment Support Unit (WHIASU)

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Delivering public health and well-being priorities through Local Development Plans (LDPs) in Wales

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About this document:

This report presents a summary of the methods and key findings of a review of how health is included in case study Local Development Plans in Wales and the effectiveness of LDPs in supporting the delivery of health and well-being priorities. The report is intended to inform and support the Wales Health Impact Assessment Support Unit.

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Executive summary

Local development plans, health and well-being

Local development plans (LDPs) prepared by local planning authorities in Wales are important documents in establishing the framework for the making of planning decisions, as well as shaping the future development of their area over a 15-year period. LDPs are also significant in shaping many of the determinants of people's health and well-being. This research report examines how local planners and local health board teams in Wales can work with each other to support health and well-being.

The planning framework

The past decade has seen the development of a legislative and policy framework that is supportive of positive plan-making to promote health and well-being. This includes The Well-being of Future Generations Act 2015, the preparation of Future Wales 2040 as a national development framework for Wales, and revisions to Planning Policy Wales. These changes support local planning authorities to plan positively for health and well-being.

LDPs must be reviewed every four years from the date of adoption, and if the review concludes that the plan needs updating, a replacement plan will be prepared. Several 'next generation' replacement LDPs are in preparation across Wales and several of these have recently reached point of adoption or deposit (the full draft version of an LDP which is produced prior to adoption).

Key research findings

The purpose of the research is to identify the effectiveness of LDPs in supporting the delivery of health and well-being priorities in Wales. This report documents research into three case studies of recently adopted, deposited or near-deposit LDPs in Wales. The report is aimed at local planners involved in preparing replacement LDPs and professionals working in local health boards.

The report finds that health and well-being are prominent themes in recent LDPs and that these are embedded in the strategic objectives and strategic policies of the case study LDPs. LDPs address a very wide range of health and well-being themes and priorities, with an emphasis on the planning system's enabling role in providing places that support active and healthy lifestyles. This is often based on enabling access to key services and facilities that support good health and being able to do so by utilising active travel opportunities.

The research identifies the advantages of local planning authorities engaging with public health professionals at formative stages of plan preparation, as well as aligning with local well-being plans. Sustainability appraisals and health impact assessments undertaken during LDP preparation are identified as helpful in broadening out the health and well-being dimensions that planning can address and support. These assessment processes do not identify any extensive gaps in evidence on health and well-being but can help refine and extend evidence to support plan-making.

Opportunities for improvement

The key opportunities and changes that planners involved in the case studies identify for improving the addressing of health and well-being themes through LDPs include:

- being able to access improved evidence and more information on the forward planning and future provision of healthcare facilities, including primary care and general practice;
- being able to influence health and obesity issues such as through changes to the Use Classes Order to enable better control of the food environment and hot food take-aways;
- having a clearer set of expectations and practices for health impact assessment in development management and the consideration of planning applications for strategic sites and larger-scale developments.



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1. Introduction: planning, public health, and well-being

Key points

- The legislative and policy context in Wales provides a strong platform for addressing health and well-being themes within the planning system
- Many local planning authorities in Wales are in the process of preparing replacement LDPs, and are utilising the policy framework to enable a clear focus on health and well-being
- This research focuses on understanding the approach to addressing health and well-being in three LDP case studies in Wales, and considers the potential for effective inclusion of health and well-being policies in LDPs

Context

Changes to the planning system in Wales and its legislative and policy context over the past decade provide a strong platform for addressing health and well-being themes in local planning policies and in planning decisions. The changes include the introduction of the [Planning \(Wales\) Act 2015](#) and the [Well-being of Future Generations Act 2015](#). The publication of Wales's first national development framework in the form of [Future Wales 2040](#) also sets out opportunities for the way the planning system can address health inequalities and support people to live healthy lives. Revisions to recent editions of [Planning Policy Wales](#), including alignment with the Well-being of Future Generations Act and embedding a placemaking approach to planning, have also established a supportive policy context.

Many of the current LDPs were prepared prior to these changes in legislation and policy. Activity is now underway across local planning authorities in Wales to prepare replacement LDPs that can embrace these changes and the opportunities they present to support positive health and well-being outcomes. Timing in preparing replacement LDPs varies across Wales, but there are now a small number of replacement plans that have been adopted in the past three years and others that have reached an advanced stage of preparation.

This report was commissioned by Public Health Wales to evaluate LDP policies on how they incorporate health and well-being priorities and aim to address health inequalities. The report is aimed at local planners involved in preparing replacement LDPs and professionals working in local health boards. The purpose of the report is to identify opportunities for collaboration between local planning authorities and local health boards to support improved health and well-being and reduce health inequalities. The project aims to answer a series of research questions through conducting a review of the national planning context, examining three case studies of LDPs in Wales, and engaging stakeholders in a workshop to review the initial findings of the research.

Research questions

1. **How are public health and well-being priorities expressed in local development plans in Wales?**
 - a. What are the key public health issues found in recent LDPs?
 - b. How are effective health and well-being policies worded?

- c. How are health and well-being policies evidenced?
- d. How are health and well-being policies used during decision-making (i.e. development management)?

2. What are the key challenges and opportunities involved in integrating public health priorities into LDPs?

- a. What is the availability, form, and utility of public health evidence for plan-making?
- b. What are the skill levels and confidence of local planning policy officers in engaging with public health and well-being priorities?
- c. What are the opportunities for improving address of public health and well-being issues?

Case study research

The project focuses on three case studies of LDPs in Wales. The selected case studies are Bridgend, Cardiff, and Conwy. The case studies were selected as either recently adopted LDPs or plans at an advanced stage of preparation. The number of replacement LDPs adopted in Wales in the past three years is small and progress on preparing these plans varies across the local planning authorities, dependant on the timing of needing to replace current plans. Each case study is based on a review of documentary sources prepared as part of the plan-making process – including the deposit or adopted plan, sustainability appraisal, examination documents, and any representations made and evaluated during consultation. The documentary analysis was then complemented by semi-structured interviews with local authority planners and professionals working in local health boards. The initial case study findings were presented and discussed at a workshop. The discussion at the workshop also informs this report.

The project secured approval from the School of Geography and Planning Research Ethics Committee in January 2025.

2. Summary of research and literature review

Key findings from review of literature

- There is an extensive evidence base on the determinants of health, including the impacts of the built and natural environment on public health.
- There are many areas where planning can play a role in shaping public health, especially in terms of promoting and enabling physical activity, including through active travel, supporting the delivery of new homes, and providing access to green and natural spaces.
- Collaboration between planning authorities and public health teams in local health boards is critical to developing plan policies that can better support healthy lives.

Introduction

The research includes a review of academic and professional literature on planning, health and well-being to inform the analysis of the case studies of LDPs in Wales. This section provides a concise summary of the review. The review is included in full as an annex to this report.

Planning, health and well-being: the evidence base and making the connections

There is now a significant range of research and evidence highlighting the connection between public health and planning. Case study research by Public Health England (2017a) emphasises the relationship between various planning-related themes and public health, including designing neighbourhoods for walking and cycling, ensuring good standards of housing, providing opportunities for growing food as part of a healthier food environment, as well as providing access to green spaces and the natural environment.

Research by Public Health Wales (2018) similarly sets out the various dimensions of how the built and natural environment impact on health and well-being. The study echoes other research with an emphasis on traditional infrastructure, as well as green and blue infrastructure, in supporting safe and active travel within neighbourhoods. The research also relays the significance of local health and care facilities, reducing air pollution, and enabling healthier food choices.

Some of the more important themes identified in this literature where planning can influence health and well-being include:

- **Active travel.** Plan policies can promote active travel, including walking and cycling, with positive benefits for health and for the environment.
- **Housing.** Good quality, affordable and appropriate housing is important for people's health and well-being (Public Health England, 2017). Planning supports the allocation of land for housing, including affordable housing.
- **Green space.** Access to green spaces is widely recognised as beneficial for both physical and mental health. Studies provide strong links between proximity to green spaces and lower rates of stress and cardiovascular disease (Thompson & Oliveira, 2016; Gianfredi, et al., 2021).

There are also studies that set out the social determinants of health and focus attention on health inequalities arising from disadvantage, lower incomes, and poverty (see Public Health England, 2017b, and especially chapter 6). Research on health inequalities arising from social determinants of health frequently relay data on spatial variation in life expectancy.

Legislation supporting planning for health and well-being

An effective and robust framework of legislation is recognised as an important aspect of promoting improved health and well-being through planning systems (Ige-Elegbede, et al, 2021). In Wales, a robust legislative framework supports the integration of health and well-being goals into LDPs. The Well-being of Future Generations (Wales) Act 2015 establishes seven well-being goals (Figure 1), mandating public bodies to consider the long-term impact of their decisions on economic, social, environmental, and cultural well-being.

Additionally, the Planning (Wales) Act 2015 strengthens the commitment to public health in spatial planning by requiring local planning authorities (LPAs) to consider how development can improve health outcomes, with specific reference to promoting physical activity, reducing air pollution and ensuring access to green spaces.

Collaborative working in planning and health

Effective integration of health goals and priorities into LDPs requires collaboration between public health professionals, urban planners, and other stakeholders. Mourits, Velden, &

Molleman (2021) illustrate the importance of cross-sector collaboration in creating healthy living environments.

Collaboration between planners, public health professionals and other key stakeholders can be impacted by structural and cultural barriers (Chang & Carhart, 2023). Varying requirements across different sectors in relation to research, evidence and policy-making practices can also present challenges to collaborative working (Ige-Elegbede, et al., 2021). Moreover, the differing timescales of planning and public health interventions present further challenges. There is a range of material that attempts to address these challenges and promote improved collaboration across planning and public health.

Health Impact Assessment (HIA)

The use of Health Impact Assessments (HIAs) is emphasised as a practical tool for integrating health considerations into spatial planning (Green et al, 2020). HIA is also an opportunity for promoting improved collaboration across planning and public health teams. Public Health Wales (PHW) has developed an HIA toolkit to assist planners in embedding health into LDPs, facilitating a structured approach to assess potential health outcomes of planning decisions.

Bird and Hyde et al (2024) also provide practical guidance for the development of local plan policies in England, including on health impact assessment. The guidance explores the integration of health impact assessment as part of sustainability appraisal and the role of assessment in identifying 'gaps' in address of health themes and opportunities for enhancement.

Training and Capacity Building

There is a recognised need for ongoing training and capacity building among professionals involved in both planning and public health. A lack of training in techniques such as health impact assessment and community engagement can limit the addressing of key public health issues within LDPs. It is identified within literature that a lack of specialised skill training in public health within planning departments is a significant challenge. Other studies have also identified the importance of two-way communication interaction and learning between planning professionals and public health professionals to promote better understanding of the interaction of planning and public health (Public Health England, 2017).



Community Engagement and Participation

Involving communities in the planning process is crucial. Engaging residents and other stakeholders ensures that plan-making reflects local needs and preferences, builds agreement on shared priorities, and leads to more effective and accepted health interventions within communities (Mourits, Velden, & Molleman, 2021).

Developing local planning policies for health and well-being

There is an increasing range of practical guidance on developing local plan policies for delivering health places. This practical guidance can be especially valuable in the challenging task of translating strategic objectives on planning and health into practical steps, actions and impacts (Chang & Carhart, 2023).

For example, Bird and Hyde et al (2024) prepared guidance for local authorities in England to develop policies to promote health through Local Plans. The guidance emphasises the importance of collaboration between planners and health professionals. Similarly, the guidance supports the inclusion of strategic policies in local plans on health and well-being, argues for a clear definition of health inequalities, and the use of local health data as evidence to inform policies.

Monitoring and Evaluation

Establishing mechanisms to monitor and evaluate the health outcomes of plan-making and planning decisions is vital. Ongoing monitoring and evaluation are crucial for assessing the effectiveness of health-oriented planning initiatives. Without robust systems for tracking health outcomes and assessing the impact of development projects, it is difficult to determine whether public health goals are being achieved. Chang, Green, & Petrokofsky (2022) underscore the importance of establishing clear indicators to monitor the health impacts of development and ensure accountability.

Conclusions from the review of literature

The review of literature on planning and public health identifies a series of conclusions that can inform the analysis of the planning policy context in Wales and the case studies of LDPs:

- There is an extensive evidence base on the determinants of health, including the impacts of the built and natural environment on public health.
- There are also other important considerations linked to spatial inequalities in public health that result from variation in access to services and green spaces.
- There are many areas where planning can play a role in shaping public health, especially in terms of promoting physical activity, including through active travel, supporting the delivery of new homes, and providing access to green and natural spaces.
- Legislation can play an important role in supporting the consideration of health and well-being in plan-making and in making decisions on development proposals.
- Collaboration between planning authorities and public health teams is critical to developing plan policies that can better support healthy lives.
- Health impact assessment is a valuable activity in promoting collaboration and identifying opportunities to enhance plan policies related to health and well-being.
- There is already useful guidance available in some planning systems, including England, on developing local plan policies for public health and well-being.

3. National Policy Context for Planning, Health and Well-being

Key points

- National planning policies of the Welsh Government are very important in shaping the content of LDPs and influencing individual planning decisions.
- Health and well-being themes and priorities are well represented and addressed comprehensively in the strategic content of Future Wales 2040. There is nevertheless scope for enhanced address of health and well-being priorities in the four regional sections of Future Wales.
- Planning Policy Wales (PPW) also features the delivery of healthy environments as a national sustainable placemaking outcome. PPW includes detailed address of land use policies that can contribute to healthy environments and lifestyles.
- There is overall a very positive national planning context for addressing health and well-being themes in the preparation of LDPs.

Introduction

Local development plans are prepared by local planning authorities within the context of national planning policies. These national planning policies are highly influential in shaping the content of LDPs. The examination of deposit-stage LDPs by an independent planning inspector includes assessment of whether the plan is consistent with these national planning policies.

This section of the report provides a high-level evaluation of health and well-being issues in national planning policy in Wales. The evaluation incorporates Future Wales 2040 and Planning Policy Wales as the two key plan and policy documents shaping LDPs.

Future Wales 2040

[Future Wales – the National Plan 2040](#) is the national development framework prepared by Welsh Government with the intention of setting the direction for land use and other development in Wales to 2040. The first version of Future Wales was published in January 2021 and has therefore framed the case study LDPs in later sections of this report. Future Wales has 'development plan' status and is one of the principal considerations in determining applications for planning permission alongside LDPs. Future Wales is also cross-referenced with Planning Policy Wales.

Future Wales includes a 'Model of Future Wales Influence' diagram which highlights several sectoral strategies, plans and policies including transport, infrastructure, economic development, and the marine environment. This does not include any specific health-related strategies of Welsh Government or public health organisations. There is nevertheless reference to the Well-being of Future Generations Act and Local Well-being Plans.

'Our Health' is identified in chapter 2 of Future Wales as one of the 'key challenges' facing Wales. The challenge is framed primarily in terms of life expectancy and general health reporting by the population. Spatial patterns of general health reporting are mapped in Future Wales by local authority area. Health and health-related themes are addressed in several of the 'Future

Wales Outcomes' and especially outcomes 1, 3 and 9. Outcome 1 references 'healthy' places and quality of life. Outcome 3 recognises the distinctiveness of regions and includes reference to tackling health and socio-economic inequality. Outcome 9 refers to places benefiting from reduced pollution and enabling healthier and more liveable places. The question 'Has Future Wales made places healthier?' is identified in Future Wales as one of seven questions designed to determine the progress made in achieving objectives and outcomes. In summary, health and well-being themes and objectives are well represented in Future Wales in terms of high-level challenges and outcomes.

Future Wales sets out a national development framework and has a regional planning component. Future Wales identifies four regions within Wales as part of a three-tier planning system comprising Future Wales, Strategic Development Plans, and Local Development Plans. Regional statements and policies are set out in Future Wales for each of the four regions. Health and well-being themes appear less prominent in the section on 'The Regions' than in the preceding sections addressing key challenges and national policies. There is potential to better reflect health and well-being themes within these regional statements and policies in a future revision of Future Wales, especially given their role in shaping the strategy and policies in Strategic Development Plans.



Future Wales 2040 is an important document, alongside Planning Policy Wales, in shaping the policy themes and issues addressed in LDPs. Health and well-being issues feature prominently in the detailed text of Future Wales 2040. There is frequent reference to the ambition of a healthier Wales, creation of 'healthy places', addressing of health inequalities, and promotion of well-being. The series of health-related themes and issues addressed in Future Wales include:

- **Health inequalities** in terms of (1) geographic variation in life expectancy, both between Wales and other parts of the United Kingdom and between different parts of Wales, and (2) self-reported health data
- Promotion of **healthier lifestyles**
- Promotion of **active travel** – with specific reference to the health benefits of active travel in terms of physical movement and alternatives to the stress of commuting
- Ensuring health and well-being are considerations **in site selection** and site design
- Demographic change with an emphasis on an **ageing** population
- Reducing emissions and tackling **pollution**
- **Access to parks, green spaces** and other places of recreation and the linkage to physical and mental health
- The significance of digital infrastructure and communications in supporting people's well-being through facilitating **social connections**
- The value of ecosystems in creating **clean air and water** for supporting our health and well-being

- The relationship between **poverty** and health
- Influencing the location and accessibility of **leisure and health facilities**
- Access to **health services** and social services
- Recognition of the impacts of vehicular traffic on **air and noise pollution** and the effects of these on people's health
- Health and social care recognised as elements of the **foundational economy** that planning can support
- **Public health bodies** and organisations are acknowledged, including local health boards, for their common purpose alongside other public bodies in delivering 'A Healthier Wales' as part of the Well-being of Future Generations Act 2015.

In summary, Future Wales 2040 addresses a wide range of health and well-being priorities and therefore embeds health and well-being as significant in the statutory plan framework.

Planning Policy Wales

Planning Policy Wales (PPW) is a document setting out the **land use policies** of the Welsh Government. This section of the report examines how PPW addresses health and well-being themes. PPW is an important reference point for local planners when preparing a LDP. PPW is also important when local planning authorities determine planning applications. PPW is therefore influential in shaping the content of local planning policies and informing local decisions. The latest edition of PPW is edition 12 released in February 2024. PPW is also supported by a series of Technical Advice Notes (TANs).

PPW sets out that planning authorities are under a **duty to have regard to the Local Well-being Plans** prepared by Public Service Boards during the preparation of LDPs. PPW also emphasises that it is a mechanism for translating a wide range of Welsh Government objectives and strategies – which will include those related to health and well-being - into a series of land use policies.

The primary objective of PPW is to ensure that the planning system contributes to the delivery of sustainable development. This is linked to the social, economic, environmental, and cultural well-being of Wales. Health is not directly referred to in this high-level objective although is within the scope of social well-being. The reference to the **planning system supporting the well-being goals** in the Well-being of Future Generations Act 2015 also provides a direct linkage to the well-being goal of 'A Healthier Wales'.

PPW also references 'the Socio-economic Duty' on public bodies in Wales, including those preparing LDPs. This requires local planning authorities to have due regard to the need to **reduce the inequalities of outcome** that result from socio economic disadvantage. Health inequalities are not directly referred to in setting out that duty in PPW, yet are relevant to inequalities arising from socio-economic disadvantage.

PPW is organised around the concept of '**placemaking**' as a way to create sustainable places and improve the well being of communities. PPW defines placemaking as 'a holistic approach to the planning and design of development and spaces, focused on positive outcomes'. Sustainable places are defined as those that are 'attractive, sociable, accessible, active, secure, welcoming, **healthy** and friendly'. The definition of placemaking in PPW also references **health, happiness, and well-being**.

PPW sets out a series of 'key planning principles' and these include 'facilitating accessible and **healthy environments**'. This provides an important connection between land use planning and decision-making, the accessibility of different uses, and the ability to support healthy lives. There is reference also to **good physical and mental health** in setting out these key planning principles. PPW also clearly asserts that 'Our built and natural environments should be planned to promote mental and physical well being' with an emphasis on participation, collaboration and a preventative approach.

The 'key planning principles' in PPW are also developed into a series of 'national sustainable placemaking outcomes'. These include a set of outcomes for the principle of facilitating accessible and healthy environments. There are ten national sustainable **placemaking outcomes linked to accessibility and health**. These cover a wide range of topics including active travel, access to green space, access to services, safety and inclusivity, and physical and mental health and well-being.

PPW highlights that the built and natural environments are key **determinants of people's health and well-being**. The planning system is recognised as shaping factors that have a direct impact on people's health. Plans and planning decisions are also identified as impacting on the choices that people can make in relation to various aspects of health and well-being.

The impact of disadvantage and deprivation on health outcomes is also recognised in PPW and this is expressed in a role for the planning system in identifying proactive and preventative measures to **reduce health inequalities**.

PPW references themes including social isolation, reducing air and other forms of pollution, accessibility and travel choices, and lifestyles. PPW clearly states that the planning system must operate in a way which **maximises health protection** and well being. Similarly, PPW states that 'health impacts should be minimised in all instances'.

Various detailed ways in which **healthier lifestyles**, choices and patterns can be supported are highlighted in PPW, including promotion of active travel, providing tranquil spaces, and supporting access to clean water and fresh air. The role of green infrastructure, tranquil spaces, and management of light are all recognised as important.

Plan-making and decision-making to deliver accessible and healthy places is also supported by various **appraisal and assessment tools** outlined in PPW, including sustainability appraisal. PPW supports the inclusion and integration of health impacts in these appraisals and also recognises the value that health impact assessment makes towards plan-making.

In summary, the review of PPW highlights that:

- Health and well-being are important and prominent themes and are featured in the key planning principles and national sustainable placemaking outcomes
- The built and natural environments are recognised as key determinants of people's health and well-being
- There is an emphasis on maximising people's health, minimising negative health impacts, and addressing health inequalities
- There are various detailed land use policies expressed in PPW that are related to health and well-being and these are intended to shape local planning policies in LDPs and inform individual planning decisions

Conclusion: the national planning policy context for health and well-being

The findings and conclusions of this review of the national planning policy context in Wales for health and well-being include:

- There is very clear and extensive address of health and well-being themes in Future Wales 2040. This is especially so in the identification of important, high-level challenges and setting out of intended future outcomes. The range of health and well-being themes addressed in Future Wales is comprehensive.
- Address of health and well-being themes is less extensive in those sections of Future Wales covering the four regions of Wales. There is scope in any revision of Future Wales to promote improved address of health and well-being themes in the regional policies of the framework. This is important in these regional policies acting as a 'bridge' to the preparation of Strategic Development Plans.
- There is also extensive address of health and well-being themes and priorities in Planning Policy Wales. The promotion of accessible and healthy environments is clearly identified as one of the key principles of the planning system in Wales.
- There is also in PPW a definition of ten national sustainable placemaking outcomes linked to the theme of accessible and health environments. PPW sets out a clear expectation that these will be addressed by local planning authorities when preparing LDPs.
- Various detailed policy is also set out in PPW on how the planning system can support healthy places, environments and lifestyles through plan-making and decision-making.



4. Case studies in Wales

This section of the report presents three case studies of local development plans that are recently adopted or at an advanced stage of preparation.

- The first case study is of Bridgend County Borough Council's adopted Local Development Plan, selected as one of the few recently adopted replacement local development plans in Wales, with adoption of the plan in March 2024. The Bridgend Replacement Local Development Plan is also a case study of a plan with clear inclusion of policies on health and well-being, and where health impact assessment has been embedded in both plan-making and planning policy for strategic sites.
- The second case study is of Cardiff Council's Deposit Replacement Local Development Plan, selected for its recent placing on deposit in February 2025, and the inclusion in the plan of health and well-being themes. The Plan is also a significant one as a capital city, an urban context, and a sizeable population.
- The third case study is Conwy County Borough Council's Replacement Local Development Plan. The Plan is at an advanced stage of preparation and expected to be placed on deposit for consultation in September 2025. The Council anticipates that the plan will be adopted in early 2027.

Case study: Bridgend County Borough Local Development Plan 2018-2033

Key points from the case study

- The Council developed the LDP as 'a spatial and land-use expression' of the objectives set out in the Local Well-being Plan'. Health and well-being themes are therefore prominent in the objectives and strategic policies of the LDP.
- Strategic policies in the LDP are all cross-referenced to the Local Well-being Plan.
- Health impact assessment has been important at several key stages of preparing the LDP. Policies in the LDP also set out a requirement for health impact assessment when developers submit planning applications for strategic sites.

Introduction and context

Bridgend County Borough Council adopted the Bridgend County Borough Local Development Plan in March 2024. The Plan is one of the few adopted replacement LDPs in Wales produced in the past three years. The Plan replaces the preceding Local Development Plan for the period 2006-2021 adopted in September 2013. The replacement plan preparation process was approximately six years in duration with a period of almost three years between deposit consultation and adoption. The Council is currently preparing the suite of supplementary planning guidance in support of the Plan and working to support the delivery of strategic sites allocated in the Plan.

Health and well-being are significant themes in the Plan and this is reflected in both the policies in the Plan and the background documentation produced during preparation of the Plan. The Council states that the Plan 'expresses in land-use terms the objectives of the Well-Being of

Future Generations (Wales) Act 2015 and priorities of the Bridgend Public Services Board's Well-being Plan'. The Local Development Plan is also connected strongly to the Council's Corporate Plan (2018-2023) and its objectives, including 'Helping people and communities to be more healthy and resilient'. Health impact assessment has also been an important part of the plan preparation process.

Health and well-being - Local Development Plan policies

The Plan has four Strategic Objectives which all detailed policies in the plan are linked to. One of these strategic objectives is 'To Create Active, Healthy, Cohesive, Inclusive and Social Communities'. This is elaborated with a series of more detailed objectives with health-related themes including equality of access to services – with specific mention also of health facilities - reducing air pollution, and minimising transport-related emissions. Health and well-being themes are therefore expressed at high-level in the Plan with an emphasis on active lifestyles and local service accessibility, as well as tackling pollutants and emissions.

The principal health-related strategic policy in the Plan is titled 'Health and Well-being' and is a criteria-based policy that states that 'Health inequalities will be reduced and healthy lifestyles and choices encouraged by ensuring that development proposals' are considered against six criteria. Some of these criteria are cross-referenced with other strategic policies of the Plan. The criteria include that development proposals:

- reflect the **spatial distribution of need for healthcare provision**, ensuring such proposals are accessible by non-car modes
- are **supported by appropriate social infrastructure and community facilities**
- are **supported by a Health Impact Assessment** where appropriate – with this being a requirement for major developments

The 'Health and Well-being' policy and its criteria also include reference to key determinants of health, active travel, green infrastructure and risks of pollution to human health. The explanatory text to the policy highlights health as a 'material consideration' in determining planning applications. This text also recognises that the planning system is an enabler of healthy, active lifestyles, yet the planning system also has limitations in addressing all aspects of and influences on health and well-being.

Health and well-being also feature repeatedly across other policies in the Plan and in the explanatory text. These include access to green space, opportunities for active travel, recreation spaces, access to health and other facilities, spaces for food growing and access to fresh food produce. Every strategic policy in the Plan is clearly linked and cross-referenced to themes and objectives in the Local Well-being Plan (LWBP).



In summary, the Plan has clear strategic policies on health and well-being, and health and well-being themes infuse a wide range of other policies. The identification and bringing forward of strategic housing allocations and major developments, and requiring health impact assessment of development proposals, are an important part of supporting healthy and active communities and lifestyles.

Example of strategic policy on health and well-being – Bridgend County Borough Council (2024)

Health and Well-being SP8: Health and Well-being. Health inequalities will be reduced and healthy lifestyles and choices encouraged by ensuring that development proposals:

1. Reflect the spatial distribution of need for healthcare provision, ensuring such proposals are accessible by non-car modes and have the potential to be shared by different service providers;
2. Create sustainable places that accord with the principles of placemaking (refer to SP3) to support climate change mitigation and adaptation;
3. Are supported by appropriate social infrastructure and community facilities (refer to SP9 & SP10);
4. Are supported by a Health Impact Assessment where appropriate (major developments must be supported by a HIA, which demonstrates how the proposal will result in beneficial effects (and avoid adverse impacts) on the key determinants of health in the County Borough);
5. Promote a healthy lifestyle through the utilisation of the physical and built environment, in particular maintaining and/or enhancing the extent, quality and connectivity of the Active Travel and Green Infrastructure Networks; and
6. Protect (and where possible enhance) safety, security and resilience and do not result in significant risk to life, human health or well-being, particularly in respect of air, noise, light, water or land pollution

Evidence base and consultation

An early, high-level health impact assessment (HIA) at preferred strategy stage appears to have been especially significant in embedding health themes in the Plan. Workshop activity involving key stakeholders and supported by Public Health Wales was especially valuable, including in identifying determinants of health and areas where the Plan could shape health and well-being. This led also to additional evidence needs being identified, including on the needs of disadvantaged groups and for specific themes (e.g. homeless people, isolated and older people, childhood obesity).

The screening stage of HIA identified 'gaps' in coverage, evidence and indicators – and identified additional needs related to social isolation, toilet facilities, and cross-reference to indicators and success measures in Well-being Plan, including healthy weight and child obesity. The assessment also included address of different categories of poverty – culture, fuel, food, in-work – and their link to health outcomes. These themes and categories do not appear to carry over into the Plan itself.

The principal 'gap' in the evidence base and consultation through later stages of making the Plan is the forward planning of primary and community health services. Planners referred to this being important for two reasons. First, the provision of health services, such as general practice surgeries, to align with new housing development is a key concern for residents during

plan consultation. The local planners indicated that improved forward planning data from the Local Health Board would enable the local planning authority to better address residents' concerns about impacts on access to health services. Second, health services are key to creating compact and walkable neighbourhoods and ensuring that everyday services are accessible by active travel. The ability to access everyday services and create walkable neighbourhoods was a key theme for the Council that underpins its strategy in the Plan.

Appraisal and assessment

HIA has been an important element of preparing the Bridgend Local Development Plan and has been conducted at several stages: (1) at preferred strategy stage; (2) as supporting information for candidate sites; and (3) at deposit stage. This has been conducted separate to but in parallel with a Sustainability Appraisal. The HIAs have been supported by the WHIASU team in Public Health Wales.

The scoping report for the Sustainability Appraisal identified that the objectives of the appraisal would need to be broadened in scope 'to explicitly capture issues including mental health, educational attainment, crime prevention, residential amenity, and multiple deprivation'. This underlines the need to frame sustainability appraisal objectives in an encompassing way if the full spectrum of health and well-being issues are to be addressed.

The health impact assessment at preferred strategy stage also recognised that the process of making the plan involves potential impacts on mental health and well-being. The assessment noted that change, and planning for change, can be unsettling if communities and individuals feel that they cannot influence change.

The early stages of health impact assessment appear to identify food growing and healthy food environments as uncertain in terms of whether the Plan may be able to address these effectively.

Health impact assessments submitted for candidate sites link in some cases very well to the screening HIA themes (e.g. social isolation, access to services, physical activity), but also cite specific health themes such as obesity, inactivity and cardiovascular disease, and link in some cases to policies in the plan (e.g. reference to SP8).

Implementation and monitoring

The Plan was adopted in March 2024. There has therefore not yet been any formal monitoring of the plan or any annual monitoring reports with the first AMR expected by 31st October 2025. The adopted Plan does set out the intended monitoring framework and indicators. The framework and indicators focus primarily on traditional planning indicators – floorspace, numbers of units, and decisions made in accordance with plan policies. The primary health and well-being policy, SP8, does not have any specific indicators for monitoring, but is cross-referenced with other strategic policies in the Plan, and the Plan is written to be read as a whole. The health and well-being elements of the Plan are therefore dependent principally on evaluation through a range of other strategic policies, and indirectly through its relationship to the Local Well-being Plan and the targets and indicators in that plan.

The Sustainability Appraisal monitoring framework for the Bridgend Local Development Plan refers to Objective 1 "Health and Well-being: Improve the health and well-being of the population, including with respect to physical and mental health, social well-being and community safety" – but has limited development of any health and well-being indicators or monitoring measures.

The planning policy team is engaged in revising existing or preparing draft supplementary planning guidance (SPG). The adopted Plan included a proposal to produce supplementary planning guidance on health and well-being within two years of adoption. This may not be progressed and instead replaced with use of health impact assessments for strategic sites and major development. The Council has developed a template for Health Impact Assessment of development proposals. The template is one based on a preceding template and adapted to a Welsh context. The local plan team indicate that developers are understood to be broadly accepting of the requirement for health impact assessment.

Evaluation and key findings

Health and well-being themes are very clearly profiled in The Bridgend Local Development Plan 2018-2033 in terms of plan objectives, strategic policies and detailed policies. The explanatory text also regularly references health and well-being issues. The Council's approach to the Local Development Plan as 'a spatial and land-use expression of the objectives in the Local Well-being Plan' is significant in explaining the prominence of health and well-being in the Plan. The close involvement of the Assets Sub-Board of the Public Services Board has ensured clear alignment with local health and well-being themes. The repeat and iterative use of health impact assessment at preferred strategy stage, in submission of candidate sites, and at deposit stage has been important in shaping the health and well-being focus of the Plan. This embedding of health impact assessment will also extend into consideration of development proposals for strategic sites and major developments.

There are elements of the Bridgend Local Development Plan that provide opportunity for enhancement in terms of addressing health and well-being themes. First, the Plan refers to health and well-being, and address of health inequalities, yet is not always clear in terms of which health and well-being issues are important in the local area. Similarly, the nature of health inequalities is also without definition in the Plan. Health impact assessment at preferred strategy and deposit stages is well-developed in terms of local health and well-being challenges, such as obesity, inactivity levels, isolation and ageing, etc. These specific issues become less apparent in reading the Plan and its policies. Second, some important health and well-being themes are explored in health impact assessment and sustainability appraisal, yet do not always find their way into confident expression in the Plan. Food and healthy food environments are examples of themes of this kind. Third, the monitoring and evaluation of health and well-being policies in the Plan is through its relationship to other strategic policies of the Plan and the monitoring and evaluation of those policies. Finally, the limited availability of data and forward planning for provision of health facilities is identified as impacting on the preparation and monitoring of the Local Development Plan.



Case study: Cardiff Council deposit Local Development Plan 2021-2036

Key points from the case study

- Health impact assessment workshops provided an opportunity for planners and local health teams to collaborate, and the workshops have helped to engage a wider range of stakeholders in preparation of the LDP.
- A conceptual 'Health Map' prepared by the Council supported a holistic and comprehensive approach to planning for health and well-being.
- The preparation of the replacement LDP provides an opportunity for the Council to update its existing supplementary planning guidance on Planning for Health and Well-being.

Introduction and context

Cardiff Council moved to statutory consultation on the deposit LDP in February 2025. This marked the latest stage in the development on the LDP that began in March 2021. The plan has progressed through stages of informal consultation and visioning exercises (May-August 2021), informal consultation on draft strategic options (November 2021-February 2022), and statutory consultation on the preferred strategy (July-October 2023). A series of consultation events were being undertaken concurrently to this research. Two health impact assessments (HIA) were completed as part of the plan preparation at the preferred strategy and deposit stages.

The plan places a notable focus on health and well-being, and particularly health inequalities, cutting across key themes of the Council's 'Stronger, Fairer, Greener' strategy and reflects the seven objectives of the Cardiff Local Well-being Plan 2023 to 2028. The plan furthermore represents a response to the changed policy context in Wales since the existing Local Development Plan 2006-2026 was adopted in January 2016. Influential policies include the Well-being of Future Generations (Wales) Act 2015 and Future Wales: The National Plan to 2040.

Health and well-being - Local Development Plan policies

The plan presented 23 strategic policies organised around the 'Stronger, Fairer, Greener' strategy, each elaborated by further detail on key themes and objectives. SP13: Securing Health and Well-being, and Resilience states that it will 'seek to promote economic, social, cultural and environmental benefits and reduce health and well-being inequalities through creating accessible and healthy environments'. This strategic policy targets the social determinants of health, and the relationship between development and health. Specific focus of the policy is the delivery of active travel opportunities, good air quality, access to education and healthcare services, good quality housing, community spaces, and places for play and food growing. These themes are notably found in further strategic policies (including SP4, SP5, SP10, SP18, SP19, SP21, SP22) reflecting a holistic and cross cutting approach to planning for health and well-being.

Further detailed policies are provided, and the primary health and well-being policy is HF1: Health, Well-being, and Food Sustainability. This policy provides the criteria for which the Council will support developments, including developments that:

- Provide and promote infrastructure that prioritises walking and inclusive cycling and access to public transport.
- Provide accessible and well-maintained green infrastructure, open green spaces and blue spaces.
- Provide a food growing and food retail environment that enhances access to healthy food choices.
- Provide local facilities that enable access to community, healthcare and social care services.
- Consider the capacity of existing healthcare facilities and help provide additional facilities where a need is identified.
- Ensure low levels of air pollution.
- Are supported by a Health Impact Assessment for major developments where appropriate.

Policy HF1 notes that planning for health and well-being is a potential 'material consideration' in development, and the inclusion of a requirement of a Health Impact Assessment for larger developments makes explicit the impact upon health and well-being in large development proposals. Additional detail is provided relating to a preference to limit hot food takeaway provision, particularly in deprived areas, as well as the provision of local food growing opportunities. Food growing is further elaborated in policies HF2: the Provision of Allotments and HF3: the Provision of Food Growing Space in New Developments. Policy HF3 is explicitly noted as requiring the publication of Supplementary Planning Guidance (SPG) to support developers.

Example policy – HF1. Health, well-being and development. Cardiff County Council Deposit Local Plan, February 2025.

The Council will support developments that:

- i. Provide and promote infrastructure that prioritises walking and inclusive cycling and access to public transport.
- ii. Provide and promote road safety measures to reduce vehicle speed.
- iii. Provide accessible and well-maintained green infrastructure, open green spaces and blue spaces.
- iv. Provide a food growing and food retail environment that enhances access to healthy food choices.
- v. Provide local facilities that enable access to community, healthcare and social care services.
- vi. Consider the capacity of existing healthcare facilities and help provide additional facilities where a need is identified
- vii. Ensure low levels of air pollution.
- viii. Deliver a range of homes, according to population need, that are warm, naturally lit and well-ventilated and have adequate kitchen facilities, cycle storage and access to outdoor spaces.
- ix. Are supported by a Health Impact Assessment for major developments where appropriate.

Developments that are considered to have an unacceptable impact on health and well-being will not be permitted.

Evidence base and consultation

Two HIAs were completed during plan preparation, one at the preferred strategy stage and one at the deposit stage. These workshops were facilitated by the WHIASU team in Public Health Wales and Cardiff and Vale University Health Board's public health team and brought together stakeholders, some of whom are not typically involved in the planning sector, including primary care providers like GPs. This process was noted as successful by Cardiff Council. Notably, the deposit stage HIA report highlighted gaps in the draft plan, including a lack of informal play space. While provision was made for formal space, such as parks, there was a lack of informal play opportunities identified. Gender sensitive design, including play space, was also highlighted in the HIA process.

At deposit plan stage, some evidence and policy gaps remain. There is a lack of clear guidance from Welsh Government on how to implement the requirement for large developments to be accompanied by an HIA. There remain questions as to who will assess the data and HIAs in the development management process as planning applications for strategic sites come forward. A further gap is noted in evidence and policy to support the restriction of hot food takeaways near schools and in deprived areas. It was highlighted by the Council that England has stronger data than Wales to support such a policy. Planners also highlighted that in Wales there is no specific use class for hot food takeaways – a high-level categorisation of different land uses - to allow for policy restrictions to be enacted.

A limitation is also noted in terms of the forward planning of primary care provision, including the planning of GP practices alongside plans for large scale housing delivery. GP contracts and engagement are a responsibility of the Cardiff and Vale Health Board and it is felt by those interviewed to be a reactive rather than a proactive process. Steps are being taken to improve the communication between the Health Board and the two local planning authorities the health board covers (Cardiff and the Vale of Glamorgan). A LDP reference group between the 3 organisations meets quarterly with the purpose of sharing information about the timescale of the LDP implementation and the development of major strategic sites so that the Health Board can consider potential implications for health service provision. This group also enables the planning authorities to have an understanding of the Health Board's strategic direction, spatial plans for healthcare provision and where specific service constraints lie.

Appraisal and assessment

In addition to the two HIAs conducted at preferred strategy stage and deposit stage, the plan preparation was supported by additional assessments and technical documentation. In relation to health and well-being, these include:

- Final Integrated Sustainability Report
- Background Technical Paper on Health and Well-being

The Integrated Sustainability Appraisal (ISA) provided an assessment of strategies, policies and candidate sites within the deposit LDP. It was found that planning for health was represented in 8 of the 11 LDP vision objectives, and 12 of the 23 strategic policies. It is noted that 'particularly sustainable policies are those that aim to enhance (not simply protect) the environment and social/health facilities', and that the policies HF1-3 meet these criteria. Overall, the ISA finds that people's health is likely to improve greatly over the duration of the plan.

Recommendations from the Health Impact Assessment report conducted in May 2024 are provided within the ISA document dated January 2025. This repeats participant concerns regarding the control of hot food takeaways near schools and highlight wording of policies that require additional detail. Examples include policy C1 and the meaning of 'accessible' and policy C3 'good standard of lighting'. The deposit plan does not seem to provide additional detail on these points.

The Health and Well-being technical paper provides an assessment of the current context and forms a part of the evidence base to support the main Health and Well-being policy (HF1) in the deposit plan. The use of the conceptual 'Health Map' diagram to represent a holistic response to health and well-being is continued from the 'Planning for Health and Well-being' SPG (November 2017).

Implementation and monitoring

The Council undertake Annual Monitoring Reports as part of the adopted LDP process. This is a formal process resulting in a report to Welsh Government on performance. This is considered to be a useful tool to identify policies that are failing. However, it is noted that the monitoring process can mask complexity and does not advocate or identify better policy design.

The Council undertake informal monitoring exercises such as reviewing development management planning reports to identify the use of the Planning for Health and Well-being SPG in relevant cases. It is expected that this practice will continue where new SPGs are issued in relation to a healthy food retail environment, and food growing space in new developments.

Prior to plan adoption, the deposit plan will be submitted for examination. This process is conducted by the independent planning inspectorate and provides scrutiny of the plan and policies. The Council welcome this critical scrutiny. It is noted that previous attempts at specific health policies, including food growing in new developments, have been rejected at examination but that the changed Welsh policy context offers more support for the deposit plan.

Evaluation and key findings

Due to existing SPGs such as the Planning for Health and Well-being SPG, and its long collaboration with the Cardiff and Vale University Health Board, Cardiff Council were able to embed a focus on health and well-being from the beginning of plan preparation. This was aided by statutory targets for house building being rolled over from the previous LDP where targets were not met.

Rapid participatory Health Impact Assessment workshops facilitated by the WHIASU team in Public Health Wales have enabled the Council to engage with consultees and stakeholders typically not included in the plan making process. This has identified evidence gaps and additional considerations e.g., the provision of informal play space to complement the typically planned for formal spaces. These workshops were highly valued by the Council.

The plan is at deposit stage and is undergoing consultation. It has not yet gone to examination, but the examination process is noted by the Council as an opportunity for additional scrutiny. This is mostly welcome but previous experience of planners suggests that examination sometimes requires policies to become more rhetorical and flexible to future need. This has impacts for enforceability of policy by potentially making wording weaker or less prescriptive. But it can also adversely affect monitoring; the Annual Monitoring Report is noted for its potential to mask complexity and rhetorically worded policy compounds this i.e., it becomes difficult to assess the impact of policy.

The key strength of the Cardiff Deposit LDP case is the collaborative work undertaken with the Cardiff and Vale Health Board and Public Health Wales, alongside its own policy context and ambitions. The evidence base was strengthened by these relationships and existing policy which has allowed an ambitious deposit Plan to emerge.

Where there are weaknesses, these are systemic and there are two notable examples. Firstly, the lack of use class for hot food takeaways limits the ability to restrict such land uses and leads to policy that is aspirational rather than prescriptive. This is an issue that requires Welsh Government resolution. Secondly, the forward planning of primary health care is a concern for planners identifying future housing need and development. The lack of forward planning limits the ability to engage key services in a proactive manner.



Case study: Conwy County Borough Council Replacement Local Development Plan 2018-2033

Key points from the case study

- The replacement LDP demonstrates a significantly more developed engagement with health and well-being themes than the earlier, adopted LDP.
- The plan addresses a wide range of both physical and mental health and well-being themes. These include promoting physical activity, access to natural spaces, and addressing social isolation.
- The plan highlights the interconnections between disadvantage, deprivation, and poor health outcomes. There is emphasis in the plan on proactive measures to reduce health inequalities.

Introduction and context

Conwy County Borough Council began work on their Replacement Local Development Plan in 2018. The plan progressed through pre-deposit consultation (December 2018-January 2019). The Preferred Strategy, which underwent statutory consultation (July 2019-September 2019), set out the plan's vision, objectives, strategic policies and growth plan. A Health Impact Assessment was facilitated by the Betsi Cadwaladr University Health Board (BCUHB) in November 2019,

however plan-making was significantly delayed by the Covid-19 pandemic, including Welsh Government subsequently requesting a review of plan evidence. A Rapid Participatory Health Impact Assessment was undertaken in May 2025. The Council's Cabinet in July 2025 received a full version of the replacement LDP which will progress to deposit consultation in September 2025. The Council anticipates adoption of the plan in early 2027.

The replacement LDP is also prepared in the context of the relatively recent Conwy and Denbighshire Local Well-being Plan (2023-2028). The pre-deposit plan places a more noticeable focus on health and well-being compared to its predecessor which was adopted in October 2013. The increased emphasis on health and well-being themes was also evident in the relatively detailed preferred strategy. The emerging plan represents a response to the changed policy context in Wales with early plan preparation, including the Preferred Strategy, drawing on PPW10 and the Well-being of Future Generations (Wales) Act 2015. There are several objectives within the RLDP which are particularly relevant to health and well-being, notably regarding placemaking (SO1); community facilities and services (SO4); recreational spaces (SO5) and sustainable transport and accessibility (SO6).

Health and well-being - Local Development Plan policies

The RLDP seeks to embed health considerations through its vision and specific objectives tied to placemaking, community services, recreation, and sustainable transport. An attempt has been made to treat health and well-being as structurally integrated, especially through policies that affect housing, accessibility, green infrastructure, and transport. The HIA process sought to strengthen this by recommending planning interventions around healthy food environments, active travel infrastructure, and age-appropriate housing. There is an evident ambition to align land-use policy with public health goals, including addressing social isolation, mental well-being, and the ageing population's needs.

'Healthy and social spaces in Conwy' is one of the four structuring themes of the replacement LDP. This emphasises community cohesion, access to services, and enabling healthy lifestyles. This theme incorporates a range of detailed policies in the pre-deposit plan, including housing, retail, sustainable transport, access to services, and provision of recreational spaces.

Policy PL/6 is a headline health-related strategic policy in the pre-deposit plan focused on 'promoting healthier places'. The policy also includes reference to the reduction of health inequalities. Policy PL/6 is a criteria-based policy setting out requirements for new development proposals. There are a limited number of criteria covering outdoor activity and recreation, reducing exposure to pollution, promotion of active travel, and providing physical and environmental improvements.



Policy PL/6 requires development proposals to include a site and context analysis 'to determine the appropriateness of a development proposal in responding to health promotion'. The policy also requires submission of a 'Placemaking Compliance Statement' for new development proposals to reflect the requirements of policy PL/6. The supporting text to the policy highlights both physical activity and address of socialisation as important to health and well-being. The explanatory text also identifies the linkage between disadvantage, deprivation, and poor health outcomes, and the need for 'proactive and preventative measures to reduce health inequalities'.

The pre-deposit version of the replacement LDP also sets out that supplementary planning guidance will be prepared to support developers in meeting the requirements of policy PL/6.

The most significant primary healthcare challenges relate to GP access in a rural context and in low-income areas, alongside wider issues that accompany an ageing population and an economy characterised by seasonal tourism. The Council and BCUHB agreed a Statement of Common Ground to establish an agreed position in response to concerns raised by members of the public and Local Members about the Deposit RLDP about the effect of new development on health care provision in the County. This is intended to provide a position statement for the Inspector by establishing what measures BCUHB intends to take to ensure that health care provision can accommodate the growth planned for in the RLDP.

Policies that impacted on health outcomes, for example concerning community facilities, retail, recreational spaces, and tourism, were sent to colleagues at the Health Board for review, although few changes resulted. Some policies that were favoured by the Health Board, such as limiting the development of takeaways close to schools, were seen as less relevant to the county by the planning team. The positive work on the coverage and detail of plan policies reflects a longer-term collaborative relationship between planners and health professionals.

Example policy – PL/6 'Promoting Healthier Places' - Conwy County Borough Council – plan approved by Cabinet for deposit consultation (2025)

1. To promote healthier places, reduce health inequalities and contribute to the Conwy & Denbighshire Well-being Plan, development proposals are required to:
 - a. Enable opportunities for outdoor activity and recreation in line with policies set out in Recreational Spaces Strategy of the RLDP;
 - b. Reduce exposure of people to air and noise pollution in line with policies set out in the Environmental Qualities section of the plan;
 - c. Promote active travel options in line with Sustainable Transport and Accessibility Strategy of the plan, and;
 - d. Seek environmental and physical improvements, particularly in the built environment in-line with policies set out in the sustainable placemaking policy framework.
2. Site and context analysis should be submitted to determine the appropriateness of a development proposal in responding to health promotion. A Placemaking Compliance Statement should also be submitted, reflecting the requirements of this policy and policy PL/16 and site policies PL/17 to PL/25.

Evidence base and consultation

Two HIAs were completed during plan preparation, one in 2019 and a second shortly before the pre-deposit stage. The second HIA was conducted in April 2025 and facilitated by the WHIASU team in Public Health Wales, concentrating on gathering qualitative knowledge and insight

into the potential health impacts of the proposed RLDP. This process was well received by the Conwy planning team. The HIA made strong use of demographic data (e.g. population ageing, deprivation, obesity, mental health) and national statistics to establish an evidence base for health vulnerabilities in Conwy. The exchange and exploration of health data was a positive element of the established and effective working relations.

The HIA employed participatory methods, notably a stakeholder workshop that surfaced a range of health-related concerns, including:

- controlling fast food takeaways through planning policy
- measures to control proliferation of vape shops (noting this is more likely licensing issue rather than planning)
- Encourage developers to give consideration to the design of the environment to encourage physical activity
- Minimum standards for garden/ outdoor space in new homes
- Including food sustainability and food growing opportunities

Echoing findings in Cardiff, the planning team noted that England has stronger data and more effective tools available compared to Wales when looking to support the restriction of hot food takeaway near schools and in deprived areas.

The preferred strategy and pre-deposit RLDP are accompanied by Background Paper 44: Housing and Health Impact jointly prepared by CCBC and the BCUHB who provided comments on health care provision in the County, including their future strategy for meeting health care needs in a growing and ageing population. Local health team professionals also noted that the planning system in England is clearer in the financial contributions that can be secured through new development to support health care provision.

Appraisal and assessment

The pre-deposit RLDP has undergone several appraisal exercises beginning with a Sustainability Appraisal was conducted in September 2018 by Peter Brett Associates (Stantec). The SA highlights several themes that are subsequently present in the initial HIA, including flood risk and water quality. An Equalities Impact Assessment was conducted in May 2019. Health and well-being priorities did not feature heavily, however this did note the need to prioritise housing for Conwy's elderly population.

Implementation and monitoring

There is recognition of the need to liaise with local health boards and maintain engagement with service providers post-plan adoption, but detailed mechanisms for tracking health outcomes over the plan period are not specified.

Working collectively with all key stakeholders, the implementation of some of the mitigation measures outlined above will put in place a strategic approach to tackling the current capacity issues experienced within communities.

Additionally, BCUHB acknowledge and agree that new RLDP policies will not allocate specific sites for new health care facilities but will be generally supportive of new build health facilities

on suitably located sites, changes of use to provide health service provision, and improvements to existing health care and community facilities where required.

Evaluation and key findings

A positive and mutually beneficial relationship between the planning team and BCUHB helped embed a focus on health and well-being throughout the preparation of the plan. The two Health Impact Assessment workshops, including one in May 2025 facilitated by Public Health Wales, helped establish high level priorities. The approach in Conwy CBC's replacement LDP is one that attends to a range of health and well-being themes, ranging from physical activity through to addressing social isolation. Although the Council regarded health and well-being goals as one priority amongst many, both HIAs were valued by the planning team. The plan is now at pre-deposit stage with deposit consultation expected to take place in September and October 2025, and as such has yet to reach examination where key aspects of the evidence base and policy writing will be scrutinised.

5. Stakeholder workshop: discussion of initial findings

The project included a stakeholder workshop in July 2025. The purpose of the workshop was to disseminate the findings of the project in relation to the case studies and to engage stakeholders in discussion based on the initial conclusions and recommendations.

The workshop was conducted online and attended by around 25 participants from policy and practice communities across both planning and public health. The workshop included presentations from Public Health Wales, Cardiff Council, and Cardiff University, with opportunity for questions and smaller breakout groups.

Key themes and issues highlighted in the questions, answers and discussion included:

- the positive work that has been carried out at local level in Wales in linking planning and public health considerations
- the challenge of aligning various forms of assessment and appraisal in preparing a LDP, including sustainability appraisal, strategic environmental assessment, and health impact assessment
- the importance of increasing understanding among health professionals of what the planning system can deliver, and continuing to build positive relationships between planning teams, local health teams, and other stakeholders
- the need to continue to highlight the objective of reducing health inequalities between different groups and different geographical communities
- the risk that some interventions and planning policies may increase health inequalities depending on the distribution of various health-related infrastructures and facilities across an area
- The potential risk that accounting for health and well-being in development management will become a 'tick box' exercise
- the scope for Place Plans to play a role in more localised address of health and well-being themes through linking with LDP policies

6. Key findings, conclusions and opportunities for enhancement

This section sets out the principal findings and conclusions of the research. These are organised around the themes relayed in the research questions set out in the opening sections of this report. These are then complemented with key challenges and opportunities for integrating public health priorities into LDPs.

Theme 1. The expression of public health and well-being priorities in local development plans in Wales

The Well-being of Future Generations Act 2015 has been an important driver in planners embedding health and well-being policies in replacement LDPs. This is reinforced by the inclusion of well-being and placemaking as key themes in Planning Policy Wales. The **key public health issues** addressed in recent LDPs are varied and extensive. The principal health and well-being priorities included in plans are the promotion of **more active and healthy lifestyles**. Planning has a primarily enabling role by **facilitating local access to various services**, facilities and amenities, and directing new development to locations where such services are **accessible by active travel**. The services, facilities and amenities include education, employment, retail, and health care, as well as recreation and green spaces.

Additional health and well-being priorities evident in recent LDPs are promoting **improvements in environmental conditions** through reducing air and noise pollution. Plans do in some cases also address aspects of food production and access to food, although some plans appear to address these issues less confidently than other health and well-being issues. The health and well-being issues addressed in the plans studied incorporate **physical health and mental health** and embrace the wider concept of well-being.

Health and well-being themes are typically **expressed in high-level objectives** in the plans studied, as well as in **strategic policies** of the plan. These plan objectives and strategic policies also typically refer to **addressing health inequalities** and supporting healthy and active lifestyles within communities. Strategic policies directly supporting health and well-being themes are also importantly cross-referenced with other strategic policies in plans. The research has identified some health and well-being policies that are expressed as **criteria-based policies** setting out that development proposals will be supported where they meet a series of criteria. These criteria reference the provision of facilities and amenities in new development that support people and communities to live active and healthy lifestyles.

Some of the plans studied also include **more detailed policies on specific themes** such as food production, and opportunities for growing food within local communities. Examples of strong policy wording are also identified setting out requirements for new development and especially strategic sites and major developments. These include in some cases **a requirement for health impact assessments** when submitting planning applications. The case study LDPs also reflect interest by planners in preparing or updating **supplementary planning guidance** on health and well-being more generally, or specifically for food access and production.

The case study LDPs were selected as examples of plans adopted in recent years, or at advanced stage of preparation, including being recently on deposit or with deposit consultation imminent. There is therefore limited experience to date for the case study local planning authorities of

using plan policies on health and well-being in making planning decisions. The Bridgend case study has nevertheless clearly established that **health impact assessments will be required for strategic sites** as they come forward resulting in a clear linkage between local planning policy and development management. Importantly, the **monitoring and assessment of policies** on health and well-being will depend in large part on development management data and decisions. The Cardiff case study also highlights internal review of references to plan policies and supplementary planning guidance on health and well-being in committee and delegated reports on planning applications.

Theme 2. Key challenges and opportunities involved in integrating public health priorities into LDPs

The availability of **evidence to support** health and well-being policies is not reported as a significant issue except in a few specific cases. The principal area where planners expressed a need for better evidence to support plan-making was in the **forward planning of spatial provision of health care facilities**, including primary care and general practice. The time horizon for LDPs of 10-15 years is for planners not always well aligned with the typically shorter timescales for the forward planning of health facilities. This results in difficulty in ensuring that the planning of new development and future communities is supported by the full range of facilities and amenities that are accessible by active travel and public transport. The difficulty of aligning the allocation of sites for **planned residential development with health care facilities** also results in significant objection through the plan-making process. There are nevertheless some examples, including Cardiff and Vale University Health Board's long-term strategy for the period 2023-2035, where strategic planning of health provision better aligns with LDP time horizons.

An additional area where planners identified challenges in having appropriate evidence to support plan-making and writing of plan policies was in the relationship between health and food, especially access to **hot food takeaways and fast-food outlets**. Local planners indicated that the publication of national policy and guidance on these topics would support planners in more confidently bringing forward policies on the health dimensions of food outlets. They also indicated that health and well-being in relation to food could be better supported with **change to the Use Classes Order** and the creation of a specific use class for hot food takeaways, that would enable the planning system to better control the location of new takeaways.



Local planning policy teams are typically small and do not have specific skills or experience in public health and well-being priorities. The **support of public health teams** and professionals, including support from Public Health Wales at formative stages of plan preparation, is reported as especially valuable in embedding health and well-being as part of a plan. Local planners appear confident in engaging with the role that planning can play in enabling people to live more active

and healthy lives, for example through allocating sites for development in sustainable locations, supporting the delivery of active travel infrastructure, and facilitating local opportunities for recreation and access to green space. Local planners did nevertheless identify that national planning policy, technical advice and planning guidance on aspects of health and well-being could generate **more confidence in embedding these into plan-making**. The interviewees in the case studies noted that the availability of skills and expertise to interpret health impact assessments submitted with planning applications is an open question as strategic and larger-scale sites come forward. The review of HIAs received from developers as part of the planning process is something that local planning authorities will need to consider how to do if they are including requirements for HIA in LDP policies.

The **main opportunities for improving address of public health and well-being** issues identified through this research are:

- Revision of Welsh Government planning policies to more directly support the full range of health and well-being themes that can be delivered through LDPs, and production of technical advice on specific policy areas including food, health and planning, or alternatively on health, well-being and planning in general
- Production of national guidance on health impact assessment in development management to provide consistency across local planning authorities in the information supplied in making a planning application for strategic sites and larger-scale developments
- Scope to amend the Use Classes Order to create a separate use class for hot food takeaways, enabling greater control over the location of fast-food outlets in areas of significant health inequalities
- Ensuring strong linkage between the preparation of the Local Development Plan and the Local Well-being Plan at early stages of plan preparation
- Health professionals in Health Boards and PHW providing expert advice and facilitation on health and well-being priorities at formative stages of plan-making to embed these into the objectives and strategic policies of the plan
- Improved communication between local planning authorities and local health boards throughout preparation of a LDP on the forward planning of the spatial provision of health facilities and services, and continuing to LDP implementation and the development of strategic sites
- Exploring the potential for enhanced monitoring of health and well-being policies in LDPs through development of appropriate indicators. There is potential for additional work and sharing of experience in developing appropriate indicators for monitoring the effectiveness of health-related policies in LDPs.
- Supporting the preparation of supplementary planning guidance on health and well-being, including sharing of good practice on existing supplementary planning guidance. WHIASU have a range of materials and templates available to support the development of SPGs, including an SPG template for healthy weight environments.
- Development of further opportunities for partnership working between planners and health professionals, including on development of supplementary planning guidance, monitoring of health-related LDOP policies, and improving mutual understanding of planning and health themes.
- Exploration of health and well-being priorities, and health inequalities, at regional scale in Wales to support the preparation of Strategic Development Plans and the inclusion of objectives and strategic policies on health and well-being

Conclusion

The principal conclusion of this research is that national planning policies in Wales play a highly supportive role for reflecting health and well-being priorities in LDPs, and this is leading to LDPs having a clear focus on health and well-being and the reduction of health inequalities. Health and well-being themes are clearly addressed in the strategic and detailed policies in the replacement LDPs of the case studies addressed in this report. In some cases, this has led to a significant step forward in how LDPs address health and well-being priorities. Health impact assessment has been an important and participatory process that has added value to LDP preparation, as well as engaged a wider range of stakeholders. Health impact assessment has helped to identify and address any gaps in health-related data and policy coverage. Next steps and priorities for future action include monitoring the use and impact of health-related policies in replacement LDPs.

Glossary of key terms

Adopted plan	A LDP that has been independently examined by an Inspector and formally approved by the local planning authority. An adopted plan is the 'final' version of the plan and has 'statutory' status. An adopted plan is the primary consideration when deciding planning applications.
Annual monitoring report (AMR)	A report prepared annually that monitors the effectiveness and implementation of an adopted LDP.
Candidate site	Sites that landowners and developers can suggest for allocation for development in the earlier stages of preparing a LDP.
Deposit plan	A LDP that has been placed 'on deposit' for formal consultation. A deposit plan is a full version of the LDP that the local planning authority is proposing. The deposit plan and any comments on it will be examined by an independent Inspector.
Development management	The various activities undertaken by a local planning authority to manage development, including deciding planning applications and enforcement.
Development plan	A planning term for a collection or one or more plans or frameworks. The 'development plan' is the primary consideration when deciding planning applications. A local development plan forms part of 'the development plan'.
Evidence base	An extensive range of data and evidence that is collated to inform the preparation of a LDP.
Explanatory text	Text that supports and explains the policies in a LDP.
Future Wales 2040	The National Development Framework of The Welsh Government. This is a strategic expression of where development will happen across Wales. The Framework has 'development plan' status.

Health impact assessment (HIA)	A systematic approach to assessing the health impacts and effects of a plan or policies such as a local development plan.
Local development plan (LDP)	A formal, statutory plan prepared by a local planning authority. A local development plan includes the land use policies of a local planning authority and allocates sites for development.
Local health board	A statutory organisation responsible for the planning and provision of health care services in a local area.
Local planning authority (LPA)	An organisation responsible for carrying out local planning functions, including preparation of a local development plan. There are 25 local planning authorities in Wales – 22 are local authorities and 3 are National Parks.
Local Well-being Plan	A five-year plan prepared by a Public Service Board setting out the priorities and actions to improve the economic, social, cultural and environmental well-being of an area.
Material consideration	A planning issue that is relevant when deciding a planning application.
Planning Policy Wales (PPW)	A policy document setting out the land use policies of the Welsh Government.
Preferred strategy	An early-stage document in the preparation of a local development plan. The preferred strategy sets out a high-level strategy for development in an area.
Strategic objective	A high-level objective expressed in a local development plan. Detailed policies in a local development plan will usually be cross-referenced with the high-level objectives.
Strategic site	A larger-scale site allocated in a local development plan for future development, often including significant residential or mixed-use development.
Supplementary planning guidance (SPG)	Planning documents prepared by a local planning authority that supplement and elaborate on the policies in a local development plan. Supplementary planning guidance does not have the same status in decision-making as a local development plan.
Sustainability appraisal	A process of appraising the likely social, economic, environmental and cultural impacts of a plan as it is being prepared. A sustainability appraisal integrates various forms of assessment.
Technical Advice Notes (TANs)	A series of documents published by Welsh Government that provide technical advice to support Planning Policy Wales.
Use class	A category set out in a Use Classes Order that defines related uses – for example, the A1 use class in Wales is 'Shops' and A3 is 'Food and drink'. A change within the same use class is not development and does not require application for planning permission.

Annex: Research and literature review

Key findings from review of literature

- There is an extensive evidence base on the determinants of health, including the impacts of the built and natural environment on public health.
- There are many areas where planning can play a role in shaping public health, especially in terms of promoting physical activity, including through active travel, supporting the delivery of new homes, and providing access to green and natural spaces.
- Collaboration between planning authorities and public health teams is critical to developing plan policies that can better support healthy lives.

Introduction

The creation and enablement of healthy communities has emerged as a critical focus area in development plans in recent years, including in Local Development Plans (LDPs) in Wales. The Welsh Government has placed significant emphasis on improving health outcomes through spatial planning policies, to create environments that promote and enhance health and well-being and address health inequalities. This review of academic and professional literature is designed to support the analysis of national and local planning policies in Wales and the extent to which they support health and well-being priorities. The review draws on international and national research and practical guidance. The review starts by exploring the linkage between planning, health and well-being and progresses through several of the opportunities and challenges for designing local plan policies.

Planning, health and well-being: the evidence base and making the connections

There is now a significant range of research and evidence highlighting the connection between public health and planning. Case study research by Public Health England (2017a) emphasises the relationship between various planning-related themes and public health, including designing neighbourhoods for walking and cycling, ensuring good standards of housing, providing opportunities for growing food as part of a healthier food environment, as well as providing access to green spaces and the natural environment. The report also highlights various social and economic dimensions that support good health, including opportunities for employment and social and community connections. These various connections are reflected in the 'health map' developed by Barton and Grant (2006) and reproduced in the Public Health England research.



Research by Public Health Wales (2018) similarly sets out the various dimensions of how the built and natural environment impact on health and well-being. The research was designed to support implementation of The Well-being of Future Generations Act 2015 and sets out those areas where there is evidence of what supports people's health and well-being. The study echoes other research with an emphasis on traditional infrastructure, as well as green and blue infrastructure, in supporting safe and active travel within neighbourhoods. The research also relays the significance of local health and care facilities, reducing air pollution, and enabling healthier food choices. Dimensions of both physical and mental health are addressed in the study, and the study also makes important connection between individual, community, and strategic dimensions of health and well-being. Public Health Wales (2018) also sets out strategic actions for supporting each of the health themes outlined in the document. These include developing policies in LDPs on green and blue infrastructure and other key themes. LDPs are therefore recognised as important documents in helping to deliver healthy places and communities. Urban and rural planners are also identified as important in influencing all key dimensions of health and well-being.

Some of the more important themes identified in this literature where planning can influence health and well-being include:

- **Active travel.** Plan policies can promote active travel, including walking and cycling, with positive benefits for health and for the environment. International research found pedestrian-friendly design led to increased physical activity and lower rates of obesity where funding was available to support active travel infrastructure (Sallis et al, 2020; Gunn et al, 2020).
- **Housing.** Housing is important for people's health and well-being (Public Health England, 2017b). Planning supports the allocation of land for housing, including affordable housing. The Town and Country Planning Association (2025) highlights that a significant proportion of new build housing is reported as of 'poor quality'. Plan policies and decisions can promote healthier homes, including facilitating housing that is inclusive, adaptable, and supports social interaction.

Green space. Access to green spaces is widely recognised as beneficial for both physical and mental health. Studies provide strong links between proximity to green spaces and lower rates of stress and cardiovascular disease (Thompson & Oliveira, 2016; Gianfredi, et al., 2021). International studies also highlight a need to invest in green spaces and green infrastructure (Perić, et al., 2023). Many research studies emphasise these key connections between planning, health and the built and natural environment. These typically set out the ways that the design of places can lead to healthier lives, for example through promoting opportunities for physical activity or active travel. There are also studies that set out the social determinants of health and focus attention on health inequalities arising from disadvantage, lower incomes, and poverty (see Public Health England, 2017b, and especially chapter 6). Research on health inequalities arising from social determinants of health frequently relay data on spatial variation in life expectancy. The research also highlights important planning-related themes on inequality of access to green and natural spaces, as well as social infrastructure, which can exacerbate inequalities in health and well-being.

Legislation supporting planning for health and well-being

An effective and robust framework of legislation is recognised as an important aspect of promoting improved health and well-being through planning systems (Ige-Elegbede, et al, 2021). In Wales, a robust legislative framework supports the integration of health and well-being goals into LDPs. The Well-being of Future Generations (Wales) Act 2015 establishes

seven well-being goals (Figure 1), mandating public bodies to consider the long-term impact of their decisions on economic, social, environmental, and cultural well-being. This Act serves as a foundational platform guiding the integration of health objectives into local development plans and promotes alignment with the UN Sustainability Goals (Weatherup & Azam, 2020), to foster health and well-being for current and future generations (Public Health Wales, 2016). As such, LDPs are expected to reflect these priorities through planning decisions that promote healthy environments.

Additionally, the Planning (Wales) Act 2015 strengthens the commitment to public health in spatial planning by requiring local planning authorities (LPAs) to consider how development can improve health outcomes, with specific reference to promoting physical activity, reducing air pollution and ensuring access to green spaces. The combination of these legislative measures creates a legal foundation that enables planners to incorporate health and well-being in their development plans. The planning policy framework in Wales and the extent to which it reflects health and well-being priorities is assessed more fully in the next chapter.



Figure 1 - Seven Well-Being Goals (Welsh Government, 2025).

Collaborative working in planning and health

Effective integration of health goals and priorities into LDPs requires collaboration between public health professionals, urban planners, and other stakeholders. Mourits, Velden, & Molleman (2021) illustrate the importance of cross-sector collaboration in creating healthy living environments. Their research highlights that effective collaboration between planners and public health professionals can lead to more informed decision-making, ensuring that health outcomes are considered early in the planning process.

Collaboration between planners, public health professionals and other key stakeholders can be impacted by structural and cultural barriers (Chang & Carhart, 2023). A significant issue lies with operating under different institutional frameworks and with differing priorities. Varying requirements across different sectors in relation to research, evidence and policy-making practices can also present challenges to collaborative working (Ige-Elegbede, et al., 2021). Moreover, the differing timescales of planning and public health interventions present further challenges.

There is a range of material that attempts to address these challenges and promote improved collaboration across planning and public health. These include:

- 'Getting Research into Practice' prepared for Public Health England advocates for the establishment of formal mechanisms that facilitate ongoing collaboration, such as interdependent working groups and joint training programmes (Ricci et al, 2021).
- The TCPA (Town and Country Planning Association) and Public Health Wales produced a briefing on integrating planning and public health for practitioners working in Wales. The briefing highlights the opportunities for collaboration and includes practical resources for navigating the processes and protocols in planning and health (Chang et al, 2016).
- The WHO's Health in All Policies (HiAP) approach has further reinforced the need for cross-sectoral collaboration in urban development. These frameworks and ideals suggest that integrating health considerations into LDPs is essential for promoting long-term well-being.

Theoretical studies nevertheless continue to highlight important practical and methodological challenges for collaboration between health and planning sectors (Giles-Corti, et al, 2018; (Pineo & Moore, 2021).



Health Impact Assessment (HIA)

The use of Health Impact Assessments (HIAs) is emphasised as a practical tool for integrating health considerations into spatial planning. HIA is also an opportunity for promoting improved collaboration across planning and public health teams. Public Health Wales (PHW) has developed an HIA toolkit to assist planners in embedding health into LDPs, facilitating a structured approach to assess potential health outcomes of planning decisions. HIAs are also considered a practical tool for ensuring the well-being goals are considered within local planning processes and identifying positive and negative consequences for community health. The application of HIA in LDPs provides a structured method to integrate health considerations into spatial planning (Fischer, et al., 2021).

Bird and Hyde et al (2024) also provide practical guidance for the development of local plan policies in England, including on health impact assessment. The guidance explores the integration of health impact assessment as part of sustainability appraisal and the role of assessment in identifying 'gaps' in address of health themes and opportunities for enhancement. Their guidance also includes examples of plan policies setting out requirements for health impact assessment of larger-scale sites and development proposals. The guidance highlights the challenges of resources and expertise and the need for both early and proportionate assessment.

In Wales, the application of HIA is guided by public health frameworks that encourage LPAs to use these assessments within the planning system, both in relation to planning policy and development planning. However, Sharma, et al. (2022) reveal there is a significant gap in the capacity and expertise of planners to conduct effective HIAs, and planners receiving HIAs from developers also need the skills and expertise to review them. This limitation hampers the full potential of HIAs in guiding development toward healthier outcomes. Similarly, Chang, Green, & Petrokofsky (2022) argue that HIAs can fail to consider the full spectrum of health determinants, such as socio-economic conditions, which can negatively impact their effectiveness in shaping healthy environments.

Training and Capacity Building

There is a recognised need for ongoing training and capacity building among professionals involved in both planning and public health. A lack of training in techniques such as health impact assessment and community engagement can limit the addressing of key public health issues within LDPs. It is identified within literature that a lack of specialised skill training in public health within planning departments is a significant challenge.

Sharma et al. (2022) emphasise the need for planners to develop skills in conducting HIAs and applying public health knowledge to spatial planning decisions. This includes understanding the complex interactions between the built environment and health outcomes. Other studies have also identified the importance of two-way communication interaction and learning between planning professionals and public health professionals to promote better understanding of the interaction of planning and public health (Public Health England, 2017a).

To address these challenges, several initiatives have been proposed, such as providing planners with access to specialised health training and resources, as well as fostering partnerships with public health experts. Mourits, Velden, & Molleman (2021) suggest that cross-disciplinary training programmes can help bridge the knowledge gap between planning and public health professionals, enhancing their ability to collaborate and make informed decisions. Additionally, Chang & Carhart (2023) advocate for continuous professional development to keep planners updated on the latest health-related research and best practices in healthy urban development.

Community Engagement and Participation

Involving communities in the planning process is crucial. Engaging residents and other stakeholders ensures that plan-making reflects local needs and preferences, builds agreement on shared priorities, and leads to more effective and accepted health interventions within communities (Mourits, Velden, & Molleman, 2021). Research conducted by McNeish, Albizu-Jacob, & Memmoli (2022) demonstrates that community engagement leads to more inclusive and health-promoting environments, as it allows planners to consider residents' experiences.

However, Gouais et al. (2021) reveal that community engagement in the planning process is regularly considered by some communities as limited or superficial. Public participation and consultation is a requirement of LDP preparation yet the impact of such engagement on policy development and decision-making may be limited. Effective and meaningful participation is important to realising the potential for LDPs to reflect community health needs and aspirations. Moreover, effective community engagement requires planners to possess the skills and knowledge to interpret and integrate community input into health-focused planning decisions (Ige-Elegbede, et al., 2021).

Developing local planning policies for health and well-being

There is now an extensive range of research setting out the relationship between health and the built and natural environment. This is also increasingly complemented by practical guidance on developing local plan policies for delivering health places. This practical guidance can be especially valuable in the challenging task of translating strategic objectives on planning and health into practical steps, actions and impacts (Chang & Carhart, 2023).

For example, Bird and Hyde et al (2024) prepared guidance for local authorities in England to develop policies to promote health through Local Plans. The guidance rehearses some of the well-established health themes that can be influenced through local plans. The guidance also emphasises the importance of collaboration between planners and health boards. Similarly, the guidance supports the inclusion of strategic policies in local plans on health and well-being, argues for a clear definition of health inequalities, and the use of local health data as evidence to inform policies. The Bird and Hyde et al (2024) guidance also includes examples from local plans in England of strategic and detailed health-related policies.

Monitoring and Evaluation

Establishing mechanisms to monitor and evaluate the health outcomes of plan-making and planning decisions is vital. Ongoing monitoring and evaluation are crucial for assessing the effectiveness of health-oriented planning initiatives. Without robust systems for tracking health outcomes and assessing the impact of development projects, it is difficult to determine whether public health goals are being achieved. Chang, Green, & Petrokofsky (2022) underscore the importance of establishing clear indicators to monitor the health impacts of development and ensure accountability.

However, Ricci, et al. (2021) highlight that monitoring and evaluation processes in local development planning often lack the necessary resources and frameworks for assessing the health impacts of plan policies and development decisions. Many local authorities do not have dedicated staff or systems to track the health outcomes of development projects, and the absence of standardised health metrics makes it challenging to compare results across different regions.

In response, Chang, Green, & Petrokofsky (2022) argue for the development of comprehensive health metrics that can be integrated into planning and evaluation frameworks, ensuring that health and well-being are consistently prioritized in decision-making. Additionally, establishing feedback loops between monitoring bodies, planners, and public health authorities can help ensure that health objectives are continually refined and improved over time.

Conclusions from the review of literature

The review of literature on planning and public health identifies a series of conclusions that can inform the analysis of the planning policy context in Wales and the case studies of LDPs:

- There is an extensive evidence base on the determinants of health, including the impacts of the built and natural environment on public health.
- There are also other important considerations linked to spatial inequalities in public health that result from variation in access to services and green spaces.
- There are many areas where planning can play a role in shaping public health, especially in terms of promoting physical activity, including through active travel, supporting the delivery of new homes, and providing access to green and natural spaces.
- Legislation can play an important role in supporting the consideration of health and well-being in plan-making and in making decisions on development proposals.
- Collaboration between planning authorities and public health teams is critical to developing plan policies that can better support healthy lives.
- Health impact assessment is a valuable activity in promoting collaboration and identifying opportunities to enhance plan policies related to health and well-being.
- There is already useful guidance available in some planning systems on developing local plan policies for public health and well-being.



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Delivering public health and well-being priorities through Local Development Plans (LDPs) in Wales